

| POSITION                  | INITIALS | ID NO. | DATE       |
|---------------------------|----------|--------|------------|
| FEE DETERMINATION         |          |        | 09/665,184 |
| O.I.P.E. CLASSIFIER       |          |        |            |
| FORMALITY REVIEW          |          |        |            |
| RESPONSE FORMALITY REVIEW |          |        |            |

INDEX OF CLAIMS

|                     |            |   |              |
|---------------------|------------|---|--------------|
| ✓                   | Rejected   | N | Non-elected  |
| —                   | Allowed    | I | Interference |
| — (Through numeral) | Canceled   | A | Appeal       |
|                     | Restricted | O | Objected     |

| Claim    | Date | Claim    | Date | Claim    | Date |
|----------|------|----------|------|----------|------|
| Final    |      | Final    |      | Final    |      |
| Original |      | Original |      | Original |      |
| 51       |      | 51       |      | 101      |      |
| 52       |      | 52       |      | 102      |      |
| 53       |      | 53       |      | 103      |      |
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| 61       |      | 61       |      | 111      |      |
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| 79       |      | 79       |      | 129      |      |
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| 84       |      | 84       |      | 134      |      |
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| 86       |      | 86       |      | 136      |      |
| 87       |      | 87       |      | 137      |      |
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| 98       |      | 98       |      | 148      |      |
| 99       |      | 99       |      | 149      |      |
| 100      |      | 100      |      | 150      |      |

If more than 150 claims or 10 actions  
staple additional sheet here

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